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CONFIRMATION NO. 8989

<b>SERIAL NUMBER</b> 10/553,152	<b>FILING OR 371(c) DATE</b> 08/04/2006 <b>RULE</b>	<b>CLASS</b> 530	<b>GROUP ART UNIT</b> 1645	<b>ATTORNEY DOCKET NO.</b> 22083-008US1 / WA/MC/MP10	
<b>APPLICANTS</b> James Peter Burnie, Cheshire, UNITED KINGDOM; Ruth Christine Matthews, Cheshire, UNITED KINGDOM;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/GB04/01619 04/14/2004 <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0309126.1 04/17/2003					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 11/25/2006</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature: <i>[Signature]</i>		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 26161					
<b>TITLE</b> Clostridium difficile focussed antibodies					
<b>FILING FEE RECEIVED</b> 615	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		